

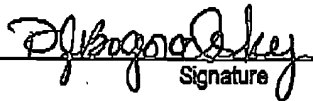
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PTO/SB/97 (08-00)

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date


Signature

DJ Bogorodsky
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In re: application of: Stephen Allott et al.

Application Number: 09/813,420

Filed: March 20, 2001

Title: DC OFFSET CORRECTION FOR USE IN A DIRECT-CONVERSION RADIO ARCHITECTURE

Atty Docket Number: 020408-001000US JMZ/djb

Being faxed to Examiner - Duy K. Le Group 2685 at facsimile number 1-703-872-9306 are the following
documents:

1. This PTO/SB/97 Certificate of Transmission (1 page);
2. PTO/SB/21 Transmittal Form (1 page);
3. PTO/SB/22 Petition for Extension of Time (1 page submitted in duplicate); and
4. Amendment (10 pages)

Number of pages being transmitted: 14


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fax ref. # 23436

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PTO/SB/21 (04-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/813,420
		Filing Date	March 20, 2001
		First Named Inventor	Allott, Stephan
		Art Unit	2685
		Examiner Name	Duy K. Le
Total Number of Pages in This Submission	14	Attorney Docket Number	020408-001000US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (10pgs) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> PTO/SB/22 Petition for Extension of Time (1pg submitted in duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. PTO/SB/97 Certificate of Transmission (1pg) 2. This PTO/SB/21 Transmittal Form (1pg)
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP	
	J. Matthew Zigmant Reg. No. 44,005	
Signature		
Date	August 26, 2004	

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